

ISSUE SLIP STAPLE AREA (for additional cross references)

09/ 997 944

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		12/20/01
O.I.P.E. CLASSIFIER		18	12/20/01
FORMALITY REVIEW	11/21	4521	12/20/01
RESPONSE FORMALITY REVIEW	EP	1027	03/16/03

BEST AVAILABLE!

INDEX OF CLAIMS

- ✓ Rejected
- Allowed
- (Through numeral) ... Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date	Claim	Date	Claim	Date
1		1		101	
2		2		102	
3		3		103	
4		4		104	
5		5		105	
6		6		106	
7		7		107	
8		8		108	
9		9		109	
10		10		110	
11		11		111	
12		12		112	
13		13		113	
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42		42		142	
43		43		143	
44		44		144	
45		45		145	
46		46		146	
47		47		147	
48		48		148	
49		49		149	
50		50		150	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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(011) 2/4/01